FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instructions)			Office use only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	1 1
Campbell for Cong	ress	<u> </u>		
		1 1 1 1 1 1 1 1 1	<u> </u>	
ADDRESS (number and street)	8105 Irvine Center	Dr, Suite 1170		
X (Check if address is changed)		1 1 1 1 1 1 1 1 1	<u> </u>	
	Irvine		CA	92618 -
	200	CITY▲	STATE	ZIP CODE ▲
COMMITTEE'S E-MAIL ADD info@campbellforce				ı
1				
COMMITTEE'S WEB PAGE				
www.campbellforc	ongress.com			
<u> </u>		<u> </u>	<u> </u>	
COMMITTEE'S FAX NUMBE 530-934-5776 2. DATE 0 4	D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICATION	NUMBER	C C00412312		
4. IS THIS STATEMENT	X NEW (N) OR	AMENDED (A)	
I certify that I have examined thi	s Statement and to the best of my k	knowledge and belief it is true, corre	ect and complete	
Type or Print Name of Treasu	urer Kelly Lawler			
Signature of Treasurer Ele	ectronically Filed by Kelly La	wler	Date 0 4	23 Y 2007
NOTE: Submission of false, erro	oneous, or incomplete information r	may subject the person signing this	•	-
Office Use Only		For further informa Federal Election Cor Toll Free 800-424-9	nmission 530	FEC FORM 1 (Revised 02/2003)